

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)

2 Total pages filed

2

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mrs. melinda  
Cox

OFFICE USE ONLY

Date Received

5/6/2024

4 ORIGINAL REPORT  
TYPE

☐ January 15

☐ Runoff

☐ Final report

☐ July 15

☐ Exceeded modified reporting  
limit

☒ 30th day before election

☐ 8th day before election

☐ 15th day after treasurer  
appointment (officeholder only)

Other (specify)

5 ORIGINAL PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

1 / 16 / 2024 THROUGH 3 / 25 / 2024

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

6 EXPLANATION OF CORRECTION

Added an in-kind contribution.

7 SIGNATURE I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.  
Check ONLY if applicable:

☐ Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_,

20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Melinda Cox, and my date of birth is [REDACTED]

My address is 3255 Roan Way, San Antonio TX 78259, USA

(street)

(city)

(state)

(zip code)

(country)

Executed in Bexar County, State of Texas, on the 16<sup>th</sup> day of May, 20 24

(month)

(year)

Signature of Candidate/Officeholder (Declarant)

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2	
2 FILER NAME Melinda Cox		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/18/24	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Maureen Hanson	8 Amount of Contribution \$ \$75.00	9 In-kind contribution description Meet and Greet
7 Contributor address; City; State; Zip Code 23707 Morning Light San Antonio, Tx 78261		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

Forms provided by Texas Ethics Comm

Reset Form

Reset Page

Revised 1/1/2024